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APPLICANTS  
 Ross Callon, Westford, MA;

\*\* CONTINUING DATA \*\*\*\*\* N/A TP \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* N/A TP \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 04/26/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <u>TRI H. PHAN TP</u> Examiner's Signature Initials	STATE OR COUNTRY MA ✓	SHEETS DRAWING 7 ✓	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 8
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ADDRESS ✓  
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TITLE  
 Network routing using link failure information ✓

FILING FEE  RECEIVED 2124	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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